

TRANSMITTAL FORM		Application Number		10/615,114			
		Filing Date		July 8, 2003			
		First Named Inventor		Mark S. Fernandez			
		Art Unit		1722			
		Examiner Name		Donald H. Heckenberg Jr.			
Total Number of Pages in This Submission		4		Attorney Docket Number		022150-9002	

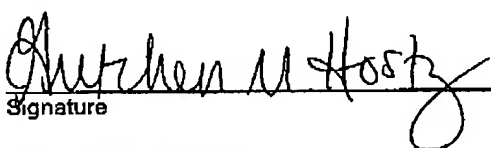
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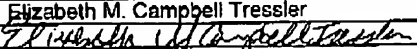
ENCLOSURES (check all that apply)				PETITION FOR EXTENSION OF TIME			
<input checked="" type="checkbox"/> Amendment/Reply - 3 pages <input type="checkbox"/> Before Final <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declarations <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO-1449 Form(s) <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Submission of Formal Drawings <input type="checkbox"/> Other:				This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. <input checked="" type="checkbox"/> Applicant(s) claims small entity status under 37 CFR 1.27. <input type="checkbox"/> Applicant(s) petitions for a one-month extension of time and pay the fee of \$120.00 (37 CFR 1.17(a)(1)-(5)). <input checked="" type="checkbox"/> Applicant(s) believes that no petition for an extension of time is necessary (37 CFR 1.36(c)); however, applicant(s) hereby petition for sufficient extension of time to render the present submission timely.			

CLAIMS FEES							
<input checked="" type="checkbox"/> No additional claim fee is required.							
				Small Entity		Large Entity	
	Claims Remaining After Amendment		Highest Number Previously Paid For	Extra Claims Present	Rate	Addit. Claim Fee	Rate
Total	21	-	21	=0	x 9=	\$	x 18=
Independent	3	-	3	=0	x 43=	\$	x 86=
<input type="checkbox"/> First Presentation of Multiple Claim					+ 145=	\$	+ 290=

FEES	
<input type="checkbox"/> Additional Claim Fee	\$0.00
<input type="checkbox"/> Extension fee for one-month	\$0.00
<input type="checkbox"/> Information Disclosure Statement	\$0.00
<input type="checkbox"/> Surcharge for Missing Parts - Declaration	\$0.00
<input type="checkbox"/> Terminal Disclaimer	\$0.00
TOTAL FEES	\$0.00

PAYMENT OF FEES	
<input type="checkbox"/> A check in the amount of \$ is enclosed.	
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1965.	
<input type="checkbox"/> The Director is authorized to charge Deposit Account Number 50-1965 in the amount of \$0.00.	

SIGNATURE OF ATTORNEY	
Gretchen M. Hosty, Reg. No. 54,721 MICHAEL BEST & FRIEDRICH, LLP 401 North Michigan Avenue Suite 1900 Chicago, Illinois 60611 Telephone: (312) 222-0800 Facsimile: (312) 222-0818	 Signature Date: December 5, 2005

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Typed or printed name	Elizabeth M. Campbell Tressler
Signature	 Date: December 5, 2005

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
Group Art Unit 1722

In re Patent Application of

Mark S. Fernandez et. al.

Application No. 10/615,114

Filed: July 8, 2003

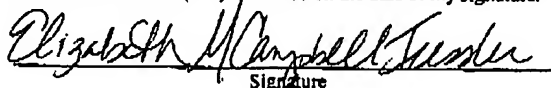
Examiner: Donald H. Heckenberg Jr.


Confirmation No.: 9109

"DEVICE FOR MELTING AND REMOLDING
CRAYONS"

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I, Elizabeth M. Campbell Tressler, hereby certify that this correspondence is being transmitted to the U.S. Patent and Trademark Office via facsimile to facsimile number (571) 273-8300 on the date of my signature.


Signature


Date of Signature

AMENDMENT AND RESPONSE TO OFFICE ACTION DATED OCTOBER 6, 2005

Sir:

This communication responds to the Office Action mailed October 6, 2005. Please charge any required fees or credit any overpayment to Deposit Account No. 50-1965.

Please amend the application, as follows:

Amendments to the specification begin on page 2 of this paper.

Remarks begin on page 3 of this paper.